Hospital Bed Inventory (Oakland, Macomb, Wayne, City of Detroit)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
McLaren Macomb	50-0060	1	Mt Clemens	288	288	
Ascension Macomb Oakland Hospital - Warren	50-0070	1	Warren	348	348	
Henry Ford Health Macomb Hospital	50-0110	1	Clinton Twp	361	361	
Select Specialty Hosp - Macomb**	50-0111	1	Mt Clemens	36	36	
DMC Surgery Hospital	63-0060	1	Madison Heights	36	0	
Ascension Macomb Oakland Hospital	63-0080	1	Madison Heights	133	133	
Ascension Providence Hospital	63-0130	1	Southfield	359	359	
Beaumont Hospital - Troy	63-0160	1	Troy	530	530	
Beaumont Hospital, Grosse Pointe	82-0030	1	Grosse Pointe	280	280	
Select Specialty Hospital**@ St. John	82-0276	1	Detroit	26	26	
Children's Hospital of Michigan	83-0080	1	Detroit	228	253	
Henry Ford Health Hospital	83-0190	1	Detroit	877	877	
Harper University Hospital	83-0220	1	Detroit	470	470	
Hutzel Women's Hospital	83-0240	1	Detroit	114	114	
DMC Rehabilitation Institute of Mich	83-0410	1	Detroit	69	69	
Ascension St. John Hospital	83-0420	1	Detroit	687	687	
Sinai- Grace Hospital	83-0450	1	Detroit	383	383	
Detroit Receiving Hospital	83-0500	1	Detroit	248	248	
Karmanos Cancer Center	83-0520	1	Detroit	123	123	
Select Specialty Hospital- N W Detroit**	83-0523	1	Detroit	36	36	830523A -new ID
Hospital Group Total	+			5632	5621	
Hospital Group Bed Need					4925	
Unmet Bed Need (Excess)					(696)	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

*** Table may not include hospitals placed under 'No Group (NH)'. For a list, go to page 34.

Hospital Bed Inventory (Oakland, Wayne)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Huron Valley-Sinai Hospital	63-0014	1	Commerce Town	158	158	
Beaumont Hospital, Royal Oak	63-0030	1	Royal Oak	1101	1101	
Ascension Crittenton Hospital	63-0070	1	Rochester	270	270	
Doctor's Hospital of Mich	63-0110	1	Pontiac	306	306	
McLaren Oakland	63-0120	1	Pontiac	278	278	
St. Joseph Mercy Oakland	63-0140	1	Pontiac	464	436	
Select Specialty Hospital-Pontiac**	63-0172	1	Pontiac	30	30	
Henry Ford Health West Bloomfield Hospital	63-0176	1	West Bloomfield	191	191	
Providence Medical Center	63-0177	1	Novi	244	244	
Vibra Hospital of Southeastern MI-Farmington Hills	63-0008	1	Farmington Hills	0	25	
Beaumont Hospital - Farmington Hills	63-0050	1	Farmington Hills	305	280	
St. Mary Mercy Livonia Hospital	82-0190	1	Livonia	273	273	
Hospital Group Total				3620	3592	
Hospital Group Bed Need					2917	
Unmet Bed Need (Excess)					(675)	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

*** Table may not include hospitals placed under 'No Group (NH)'. For a list, go to page 34.

Hospital Bed Inventory (N/A)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
Hospital Group Total				0	0	
Hospital Group Bed Need					0	
Unmet Bed Need (Excess)					0	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

*** Table may not include hospitals placed under 'No Group (NH)'. For a list, go to page 34.

Hospital Bed Inventory (Monroe, Wayne)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Promedica Monroe Regional Hospital	58-0030	1	Monroe	217	217	
Beaumont Hospital - Wayne	82-0010	1	Wayne	99	99	
Beaumont Hospital - Dearborn	82-0120	1	Dearborn	632	632	
Beaumont Hospital - Trenton	82-0170	1	Trenton	193	193	
Henry Ford Health Wyandotte Hospital	82-0230	1	Wyandotte	322	322	
Beaumont Hospital - Taylor	82-0250	1	Taylor	148	148	
Select Specialty Hospital-Wyandotte**	82-0272	1	Wyandotte	35	35	
Garden City Hospital	82-0070	1	Garden City	309	309	
Pioneer Specialty Hospital - Garden City	82-0004	1	Garden City	14	14	
Hospital Group Total				1969	1969	
Hospital Group Bed Need					1644	
Unmet Bed Need (Excess)					(325)	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***} Table may not include hospitals placed under 'No Group (NH)'. For a list, go to page 34.

Hospital Bed Inventory (Livingston, Washtenaw)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
St. Joseph Mercy Livingston Hospital	47-0020	1	Howell	66	72	
Trinity Health St. Joseph Mercy Ann Arbor	81-0030	1	Ann Arbor	524	524	
Univ of Michigan Health System	81-0060	1	Ann Arbor	1000	1145	
St. Joseph Mercy Chelsea	81-0080	1	Chelsea	103	103	
Select Specialty Hospital - Ann Arbor**	81-0081	1	Ypsilanti	36	36	
Hospital Group Total				1729	1880	
Hospital Group Bed Need					1558	
Unmet Bed Need (Excess)					(322)	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***} Table may not include hospitals placed under 'No Group (NH)'. For a list, go to page 34.

Hospital Bed Inventory (St. Clair)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
Lake Huron Medical Center	74-0010	1	Port Huron	144	144	
McLaren Port Huron Hospital	74-0020	1	Port Huron	163	163	
Ascension River District Hospital	74-0030	1	East China	68	68	
Hospital Group Total				375	375	
Hospital Group Bed Need					278	
Harris De d'Alex I (France)					(2.77)	
Unmet Bed Need (Excess)					(97)	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

*** Table may not include hospitals placed under 'No Group (NH)'. For a list, go to page 34.

Hospital Bed Inventory (Clinton, Eaton, Ingham)

	Facility		211	Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Sparrow Clinton Hospital**	19-0011	2	St Johns	25	25	
Eaton Rapids Medical Center**	23-0021	2	Eaton Rapids	20	20	
Sparrow Eaton Hospital**	23-0022	2	Charlotte	25	25	
McLaren Orthopedic Hospital	33-0010	2	Lansing	53	262	
McLaren Greater Lansing	33-0020	2	Lansing	310	73	
Sparrow Health System - St. Lawerence	33-0050	2	Lansing	50	50	
Edward W Sparrow Hospital	33-0060	2	Lansing	573	573	
Sparrow Specialty Hospital (2) **	33-0061	2	Lansing	30	30	
Hospital Group Total				1086	1058	
Hospital Group Bed Need					944	
					·	
Unmet Bed Need (Excess)					(114)	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***} Table may not include hospitals placed under 'No Group (NH)'. For a list, go to page 34.

Hospital Bed Inventory (Jackson)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
Henry Ford Health Jackson Hospital	38-0010	2	Jackson	325	325	
Hospital Group Total Hospital Group Bed Need				325	325 389	
Unmet Bed Need (Excess)					64	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.
***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Lenawee)

Hannital Nama	Facility	LICA	City	Licensed	Department	NOTES
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Promedica Charles & Virginia Hickman Hospital**	46-0020	2	Adrian	58	58	
Promedica Herrick Hospital**	46-0052	2	Tecumseh	25	25	
Hospital Group Total				83	83	
Hospital Group Bed Need					56	
Unmet Bed Need (Excess)					(27)	

***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

Hospital Bed Inventory (Allegan, Kalamazoo, St. Joseph, Van Buren)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Ascension Borgess Pipp Hospital**	03-0031	4	Plainwell	43	43	
Ascension Borgess Allegan Hospital**	03-0032	4	Allegan	25	25	
Ascension Borgess Hospital	39-0010	3	Kalamazoo	372	372	
Bronson Methodist Hospital	39-0020	3	Kalamazoo	434	434	
Bronson LakeView Hospital**	80-0041	3	Paw Paw	16	16	
Sturgis Hospital**	75-0010	3	Sturgis	84	84	
Three Rivers Area Health**	75-0020	3	Three Rivers	60	60	
Hospital Group Total				1034	1034	
Hospital Group Bed Need					804	
Unmet Bed Need (Excess)					(230)	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Branch, Calhoun, Hillsdale)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
ProMedica Coldwater Regional Hospital **	12-0010	3	Coldwater	71	71	
Bronson Battle Creek	13-0031	3	Battle Crk	189	189	
Select Specialty Hospital**	13-0112	3	Battle Crk	25	25	ACO 39-0032
Oaklawn Hospital	13-0080	3	Marshall	77	77	
Hillsdale Hospital**	30-0010	2	Hillsdale	63	63	
Hospital Group Total				425	425	
Hospital Group Bed Need					322	
Unmet Bed Need (Excess)					(103)	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Berrien, Cass, Van Buren)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Lakeland Regional Health System, St. Joseph	11-0050	3	St. Joseph	215	215	
Lakeland Hospital, Niles	11-0070	3	Niles	76	76	
Ascension Borgess Lee Hospital**	14-0010	3	Dowagiac	25	25	
Lakeland Hospital Watervliet	11-0040	3	Watervliet	44	44	
Bronson South Haven Hospital	80-0020	3	South Haven	8	8	
Hospital Group Total				368	368	
Hospital Group Bed Need					272	
·						
Unmet Bed Need (Excess)					(96)	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (N/A)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
Hospital Group Total				0	0	
Hospital Group Bed Need					0	
Unmet Bed Need (Excess)					0	

***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

Hospital Bed Inventory (Barry, Kent, Ottawa)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Spectrum Health Pennock Hospital	08-0010	3	Hastings	25	26	
Spectrum Hlth-Blodgett Campus	41-0010	4	Grand Rapids	318	318	
Spectrum Hlth-Butterworth Campus	41-0040	4	Grand Rapids	852	867	
University of Michigan Health - West	41-0060	4	Grand Rapids	208	208	
Mary Free Bed Rehabilitation Hospital	41-0070	4	Grand Rapids	119	139	
St. Mary's Health Care	41-0080	4	Grand Rapids	357	357	
Spectrum Hlth Hospital - fuller Campus	41-0090	4	Grand Rapids	20	5	ACO 41-0003
Holland Hospital	70-0020	4	Holland	173	173	
Zeeland Community Hospital	70-0030	4	Zeeland	55	55	
Hospital Group Total				2127	2148	
Hospital Group Bed Need					1635	
Unmet Bed Need (Excess)					(513)	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Muskegon, Newaygo, Oceana, Ottawa)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Trinity Health Muskegon Hospital	61-0020	4	Muskegon	331	331	
Spectrum Health Gerber Memorial	62-0010	4	Fremont	25	25	
Mercy Health - Lakeshore Campus**	64-0021	4	Shelby	24	24	
North Ottawa Community Hospital	70-0010	4	Grand Haven	81	81	
Hospital Group Total				461	461	
Hospital Group Bed Need					364	
Unmet Bed Need (Excess)					(97)	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal	
None to date						

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (N/A)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
Hospital Group Total				0	0	
Hospital Group Bed Need				-	0	
Unmet Bed Need (Excess)					0	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.
***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Ionia, Montcalm)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Sparrow Ionia Hospital**	34-0021	4	Ionia	22	22	
Sparrow Carson Hospital**	59-0010	4	Carson City	61	61	
Sheridan Community Hospital**	59-0030	4	Sheridan	22	22	
Spectrum Health United Hospital**	59-0060	4	Greenville	49	49	
Spectrum Health - Kelsey Hospital**	59-0201	4	Lakeview	16	16	
Hospital Group Total				170	170	
Hospital Group Bed Need					67	
Unmet Bed Need (Excess)					(103)	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Mecosta, Osceola, Wexford)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
Spectrum Health Big Rapids Hospital**	54-0030	4	Big Rapids	49	49	
Spectrum Health Reed City Hospital**	67-0021	4	Reed City	25	25	
Munson Healthcare Cadillac Hospital**	84-0010	7	Cadillac	49	49	
Hospital Group Total				123	123	
Hospital Group Bed Need					75	
Unmet Bed Need (Excess)					(48)	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.
***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Genesee, Lapeer, Shiawassee)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Hurley Medical Center	25-0040	5	Flint	383	383	
McLaren Regional Medical Center	25-0050	5	Flint	342	342	
Ascension Genesys Hospital	25-0072	5	Grand Blanc	400	400	
Select Specialty Hospital- Flint**	25-0071	5	Flint	26	26	
McLaren Lapeer Region	44-0010	5	Lapeer	183	183	
Memorial Healthcare**	78-0010	5	Owosso	107	107	
Hospital Group Total				1441	1441	
Hospital Group Bed Need					1339	
Unmet Bed Need (Excess)					(102)	

***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

Hospital Bed Inventory (Bay, Saginaw, Tuscola)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
McLaren Bay Special Care **	09-0010	6	Bay City	31	31	
McLaren Bay Regional**	09-0020	6	Bay City	20	20	
McLaren Bay Region	09-0050	6	Bay City	356	356	
Covenant Medical Center - Cooper	73-0020	6	Saginaw	346	346	
Ascension St. Mary's Hospital	73-0050	6	Saginaw	268	268	
Covenant Medical Center - Harrison	73-0061	6	Saginaw	277	287	
Select Specialty Hospital - Saginaw**	73-0062	6	Saginaw	32	32	
McLaren Caro Region**	79-0032	6	Caro	25	25	
Hospital Group Total				1355	1365	
Hospital Group Bed Need					994	
Unmet Bed Need (Excess)					(371)	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.
***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Huron, Sanilac, Tuscola)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
McLaren Thumb Region**	32-0020	6	Bad Axe	50	50	
Scheurer Hospital**	32-0030	6	Pigeon	25	25	
Harbor Beach Community Hospital**	32-0040	6	Harbor Beach	15	15	
Deckerville Com Hospital**	76-0010	6	Deckerville	15	15	
McKenzie Memorial Hospital**	76-0030	6	Sandusky	25	25	
Marlette Regional Hospital**	76-0041	6	Marlette	25	25	
Hills & Dales General Hospital**	79-0031	6	Cass City	25	25	
Hospital Group Total				180	180	
Hospital Group Bed Need					35	
Unmet Bed Need (Excess)					(145)	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Clare, Gladwin, Isabella, Midland)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
MidMichigan Medical Center - Clare**	18-0010	6	Clare	49	49	
McLaren Central Michigan **	37-0010	6	Mt Pleasant	118	118	
MYMichigan Medical Center - Gratiot**	29-0010	6	Alma	67	67	
MYmichigan Medical Center - Midland**	56-0020	6	Midland	308	308	
Hospital Group Total				542	542	
Hospital Group Bed Need					391	
Unmet Bed Need (Excess)					(151)	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

	Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
Γ	None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Arenac, Gladwin, Iosco, Ogemaw)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Ascension Standish Hosp**	06-0020	6	Standish	25	25	
Ascension St Joseph Hospital**	35-0010	6	Tawas City	47	47	
MyMichigan Medical Center West Branch	65-0010	6	West Branch	86	86	
MidMichigan Medical Center-Gladwin**	26-0011	6	Gladwin	25	25	
Hospital Group Total				183	183	
Hospital Group Bed Need					64	
Unmet Bed Need (Excess)					(119)	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

	Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
Γ	None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Crawford, Grand Traverse, Kalkaska, Otsego)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Mercy Hospital - Grayling**	20-0020	7	Grayling	71	71	
Munson Medical Center**	28-0010	7	Traverse City	425	425	
Kalkaska Memorial Health Center**	40-0020	7	Kalkaska	8	8	
Munson Healthcare Otsego Memorial Hospital LTCU**	69-0020	7	Gaylord	46	46	
Hospital Group Total				550	550	
Hospital Group Bed Need					462	
Unmet Bed Need (Excess)					(88)	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Charlevoix, Emmet, Mackinac)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
Munson Healthcare Charlevoix Hospital**	15-0021	7	Charlevoix	25	25	
McLaren Northern Michigan**	24-0030	7	Petoskey	202	202	
Mackinac Straits Hospital**	49-0030	7	St Ignace	15	15	
Hospital Group Total				242	242	
Hospital Group Bed Need					172	
	-					
Unmet Bed Need (Excess)					(70)	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.
***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Alpena)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
MyMichigan Medical Center Alpena**	04-0010	7	Alpena	124	124	
Hospital Group Total Hospital Group Bed Need				124	124 79	
Unmet Bed Need (Excess)					(45)	

***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

Hospital Bed Inventory (Benzie, Manistee, Mason)

	Facility		0.4	Licensed	Department	NOTES
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Paul Oliver Memorial Hospital**	10-0020	7	Frankfort	8	8	
Munson Healthcare Manistee Hospital	51-0020	7	Manistee	45	45	
Spectrum Health Ludington Hospital **	53-0010	4	Ludington	45	45	
Hospital Group Total				98	98	
Hospital Group Bed Need					55	
Unmet Bed Need (Excess)					(43)	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

	Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
Non	e to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Delta, Marquette)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
Dickinson County Memorial Hospital**	22-0020	8	Iron Mountain	49	49	
UP Health System - Marquette**	52-0050	8	Marquette	179	179	
Bell Memorial Hospital**	52-0051	8	Ishpeming	25	25	
Hospital Group Total				253	253	
Hospital Group Bed Need					256	
Unmet Bed Need (Excess)					3	

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Baraga, Iron)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
Baraga County Memorial Hospital**	07-0020	8	L'Anse	15	15	
Aspirus Iron River Hospital & Clinics, Inc. **	36-0021	8	Iron River	25	25	
Hospital Group Total				40	40	
Hospital Group Bed Need					15	
Unmet Bed Need (Excess)					(25)	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds. ***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Houghton, Ontonagon)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
UP Health System Portage**	31-0020	8	Hancock	36	36	
Aspirus Keweenaw Hospital**	31-0021	8	Laurium	25	25	
Aspirus Ontonagon Hospital**	66-0020	8	Ontonagon	25	25	
Hospital Group Total				86	86	
Hospital Group Bed Need					37	
Unmet Bed Need (Excess)					(49)	_

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

	Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
Non	e to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Chippewa, Luce, Schoolcraft)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
MyMichigan Medical Center - Sault**	17-0020	8	Sault Ste Marie	82	82	
Helen Newberry Joy Hospital**	48-0020	8	Newberry	25	25	
Schoolcraft Memorial Hospital**	77-0010	8	Manistique	12	12	
Hospital Group Total				119	119	
Hospital Group Bed Need					79	
Unmet Bed Need (Excess)					(40)	_

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

Hospital Bed Inventory (Alger, Delta)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
Munising Memorial Hospital**	02-0010	8	Munising	11	11	
St. Francis Hospital**	21-0010	8	Escanaba	25	25	
Hospital Group Total				36	36	
Hospital Group Bed Need					24	
Unmet Bed Need (Excess)					(12)	

***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34. NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

Hospital Bed Inventory (Gogebic)

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
Aspirus Ironwood Hospital**	27-0022	8	Ironwood	25	25	
Hospital Group Total				25	25	
Hospital Group Bed Need					19	
Unmet Bed Need (Excess)					(6)	•

***Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

Hospital Group NG

Hospital Bed Inventory (Kent, Livingston, Oakland, Macomb, Saginaw, Washtenaw, Wayne, City of Detroit)

	Facility			Licensed	Department	
Hospital Name	Number	HSA	City	Beds	Inventory*	NOTES
Brighton Hospital	47-0010	1	Brighton	41	41	
Henry Ford Health Macomb Hospital**	50-0080	1	Mt Clemens	5	5	
Insight Surgical Hospital**	50-0100	1	Warren	20	20	
Forest Health Medical Center	81-0010	1	Ypsilanti	68	68	
Surgeons Choice Medical Center	63-0013	1	Southfield	45	45	
Straith Hospital for Special Surgery	63-0150	1	Southfield	34	34	
Vibra of Southeastern - MI - DMC Campus	83-0002	1	Detroit	28	28	
Pioneer Specialty Hospital	63-0002	1	Pontiac	28	28	
Henry Ford Medical Ctr Cottage	82-0040	1	Grosse Pointe Farms	4	4	
Vibra SE Michigan-Taylor Campus	82-0001	1	Taylor	40	40	ACO 82-0130
Healthsource Saginaw, Inc.	73-0060	6	Saginaw	25	25	
Select Special Care Hospital-Spectrum Health**	41-0002	4	Grand Rapids	36	36	ACO 41-0090
Hospital Group Total				374	374	
Hospital Group Bed Need						
Unmet Bed Need (Excess)						

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
None to date					

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.

HG	Lic Beds	Dept Inv Beds	Curr Bed Need	Need or (Surpl)
1	5,632	5,621	4,925	(696)
2	3,620	3,592	2,917	(675)
3	0	0	0	0
4	1,969	1,969	1,644	(325)
5	1,729	1,880	1,558	(322)
6	375	375	278	(97)
7	1,086	1,058	944	(114)
8	325	325	389	64
9	83	83	56	(27)
10	1,034	1,034	804	(230)
11	425	425	322	(103)
12	368	368	272	(96)
13	0	0	0	0
14	2,127	2,148	1,635	(513)
15	461	461	364	(97)
16	0	0	0	0
17	170	170	67	(103)

HG	Lic Beds	Dept Inv Beds	Curr Bed Need	Need or (Surpl)
18	123	123	75	(48)
19	1,441	1,441	1,339	(102)
20	1,355	1,365	994	(371)
21	180	180	35	(145)
22	542	542	391	(151)
23	183	183	64	(119)
24	550	550	462	(88)
25	242	242	172	(70)
26	124	124	79	(45)
27	98	98	55	(43)
28	253	253	256	3
29	40	40	15	(25)
30	86	86	37	(49)
31	119	119	79	(40)
32	36	36	24	(12)
33	25	25	19	(6)
NG	374	374	0	0
Total	25,175	25,290	20,271	(4,645)

Excluded Hospitals

FACILITY NO	FACILITY NAME	LICENCED BEDS	COUNTY DESIGNATION	HOSPITAL TYPE
02-0010	Munising Memorial Hospital**	11	Rural	CAH
03-0031	Ascension Borgess Pipp Hospital**	43	Micropolitan	LTAC
03-0032	Ascension Borgess Allegan Hospital**	25	Micropolitan	CAH
04-0010	MyMichigan Medical Center Alpena**		Micropolitan	SC
06-0020	Ascension Standish Hosp**	25	Rural	CAH
07-0020	Baraga County Memorial Hospital**	15	Rural	CAH
09-0010	McLaren Bay Special Care **	31	Metropolitan	LTAC
09-0020	McLaren Bay Regional**	20	Metropolitan	AC
10-0020	Paul Oliver Memorial Hospital**		Micropolitan	CAH
12-0010	ProMedica Coldwater Regional Hospital **	71	Micropolitan	AC
13-0112	Select Specialty Hospital**	25	Metropolitan	LTAC
14-0010	Ascension Borgess Lee Hospital**	25	Metropolitan	CAH
15-0021	Munson Healthcare Charlevoix Hospital**	25	Rural	CAH
17-0020	MyMichigan Medical Center - Sault**	82	Micropolitan	SC
18-0010	MidMichigan Medical Center - Clare**	49	Rural	AC
19-0011	Sparrow Clinton Hospital**	25	Metropolitan	CAH
20-0020	Mercy Hospital - Grayling**	71	Rural	SC
21-0010	St. Francis Hospital**	25	Micropolitan	SC
22-0020	Dickinson County Memorial Hospital**		Micropolitan	SC
23-0021	Eaton Rapids Medical Center**	20	Metropolitan	CAH
23-0022	Sparrow Eaton Hospital**		Metropolitan	CAH
24-0030	McLaren Northern Michigan**	202	Rural	SC
25-0071	Select Specialty Hospital- Flint**	26	Metropolitan	LTAC
26-0011	MidMichigan Medical Center-Gladwin**		Rural	CAH
27-0022	Aspirus Ironwood Hospital**		Rural	CAH
28-0010	Munson Medical Center**	425	Micropolitan	SC
29-0010	MYMichigan Medical Center - Gratiot**	67	Micropolitan	AC
30-0010	Hillsdale Hospital**	63	Micropolitan	SC
31-0020	UP Health System Portage**	36	Micropolitan	SC
31-0021	Aspirus Keweenaw Hospital**	25	Micropolitan	CAH
32-0020	McLaren Thumb Region**	50	Rural	SC
32-0030	Scheurer Hospital**	25	Rural	CAH
32-0040	Harbor Beach Community Hospital**	15	Rural	CAH
33-0061	Sparrow Specialty Hospital (2) **	30	Metropolitan	LTAC
34-0021	Sparrow Ionia Hospital**	22	Metropolitan	CAH
35-0010	Ascension St Joseph Hospital**	47	Rural	SC
36-0021	Aspirus Iron River Hospital & Clinics, Inc. **		Rural	CAH
37-0010	McLaren Central Michigan **	118	Micropolitan	AC
#REF!	#REF!	#REF!	Metropolitan	LTAC
40-0020	Kalkaska Memorial Health Center**		Micropolitan	CAH
41-0002	Select Special Care Hospital-Spectrum Health**	36	Metropolitan	LTAC
46-0020	Promedica Charles & Virginia Hickman Hospital**		Micropolitan	AC
46-0052	Promedica Herrick Hospital**	25	Micropolitan	CAH
48-0020	Helen Newberry Joy Hospital**	25	Rural	CAH
49-0030	Mackinac Straits Hospital**	15	Rural	CAH
50-0080	Henry Ford Health Macomb Hospital**		Metropolitan	AC
50-0100	Insight Surgical Hospital**		Metropolitan	AC
50-0111	Select Specialty Hosp - Macomb**		Metropolitan	LTAC
52-0050	UP Health System - Marquette**		Micropolitan	SC
52-0051	Bell Memorial Hospital**	25	Micropolitan	CAH

53-0010	Spectrum Health Ludington Hospital **		Rural	SC
54-0030	Spectrum Health Big Rapids Hospital**	49	Micropolitan	SC
56-0020	MYmichigan Medical Center - Midland**	308	Micropolitan	SC
59-0010	Sparrow Carson Hospital**	61	Rural	AC
59-0030	Sheridan Community Hospital**	22	Rural	CAH
59-0060	Spectrum Health United Hospital**	49	Rural	AC
59-0201	Spectrum Health - Kelsey Hospital**	16	Rural	CAH
61-0051	Select Specialty Hospital Muskegon		Metropolitan	LTAC
63-0172	Select Specialty Hospital-Pontiac**	30	Metropolitan	LTAC
64-0021	Mercy Health - Lakeshore Campus**	24	Rural	CAH
65-0010	MyMichigan Medical Center West Branch	86	Rural	SC
66-0020	Aspirus Ontonagon Hospital**	25	Rural	CAH
67-0021	Spectrum Health Reed City Hospital**	25	Rural	CAH
69-0020	Munson Healthcare Otsego Memorial Hospital LTCU**	46	Rural	SC
73-0062	Select Specialty Hospital - Saginaw**	32	Metropolitan	LTAC
75-0010	Sturgis Hospital**	84	Rural	AC
75-0020	Three Rivers Area Health**	60	Rural	AC
76-0010	Deckerville Com Hospital**	15	Rural	CAH
76-0030	McKenzie Memorial Hospital**	25	Rural	CAH
76-0041	Marlette Regional Hospital**	25	Rural	CAH
77-0010	Schoolcraft Memorial Hospital**	12	Rural	CAH
78-0010	Memorial Healthcare**	107	Micropolitan	AC
79-0031	Hills & Dales General Hospital**	25	Rural	CAH
79-0032	McLaren Caro Region**	25	Rural	CAH
80-0041	Bronson LakeView Hospital**		Metropolitan	CAH
81-0081	Select Specialty Hospital - Ann Arbor**	36	Metropolitan	LTAC
82-0272	Select Specialty Hospital-Wyandotte**	35	Metropolitan	LTAC
82-0276	Select Specialty Hospital**@ St. John	26	Metropolitan	LTAC
83-0523	Select Specialty Hospital- N W Detroit**	36	Metropolitan	LTAC
84-0010	Munson Healthcare Cadillac Hospital**	49	Micropolitan	SC
83-0002	Vibra of Southeastern - MI - DMC Campus		Metropolitan	LTAC
82-0001	Vibra SE Michigan-Taylor Campus	40	Metropolitan	LTAC

** Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

HOSPITAL TYPE KEY				
AC	ACUTE CARE			
CAH	CRITICAL ACCESS HOSPITAL			
SC	SOLE COMMUNITY			
LTAC	LONG-TERM ACCUTE CARE			

Limited Access Area (LAA) - 6 Hospital Bed Inventory

Hospital Name	Facility Number	HSA	City	Licensed Beds	Department Inventory*	NOTES
LAA-6 Total				0	0	
LAA-6 Bed Need					121	
Unmet Bed Need (Excess)					121	

^{*}Figures in the Department Inventory column reflect CON approved hospital beds.

NOTE: Table may not include pending applications, decisions not passed, nor decisions under appeal.

Hospital Name	Facility No.	App No.	Req. # Beds	Decision	Appeal
Beaumont Hospital-Oxford	63-0006	19-0018	117	01/06/2021	CC - Yes

^{**} Excluded Hospital - Pursuant to Section 2(1)(m) of the CON Review Standards for Hospital Beds.

^{***}Table may not include hospitals placed under 'No Group (NG)'. For a list, go to page 34.